

**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

**Facility Information**

**Facility Name:** OUR HOUSE MEMORY CARE (0010772)

**Address:** 1950 STATE RD 23, WISCONSIN DELLS, WI 53965

**License Status:** REGULAR

**Licensed/Certified/Registered** 07/01/2005

**Regional Office:** SOUTHERN REGION (MADISON), (608) 243-2370

**Survey History**

**Survey ID:** 0096359      **End Date:** 02/08/2006      **Type:** STANDARD      **Purpose:** COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0094966      **End Date:** 06/02/2005      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #10008236    Served 06/08/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.33(3)(a)1	PRACTITIONER'S WRITTEN ORDER FOR MEDS	02/08/2006	Yes
83.43(3)(a)	SMOKE DETECTION SYSTEM & HEAT DETECTORS	02/08/2006	Yes

**Survey ID:** 0094942      **End Date:** 11/25/2004      **Type:** INITIAL      **Purpose:** SURVEY

**Results:** PROBATIONARY LICENSE ISSUED

*Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.*

**Provider Inspection Summary**  
For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

Complaint History
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**Date Complaint Received: 11/29/2005**

**Date Investigation Completed: 02/14/2006**

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE  
NUTRITION & FOOD SERVICES  
STAFF ADEQUACY  
QUALITY OF LIFE

Result

NOT SUBSTANTIATED  
NOT SUBSTANTIATED  
NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

**Date Complaint Received: 09/27/2005**

**Date Investigation Completed: 02/08/2006**

Subject Area(s)

PROGRAM SERVICES  
QUALITY OF LIFE

Result

NOT SUBSTANTIATED  
NOT SUBSTANTIATED

SOD #

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